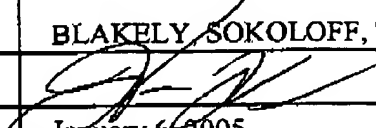



TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.		09/754,040	
		Filing Date		December 27, 2000	
		First Named Inventor		Ronen Zohar	
		Art Unit		2124	
		Examiner Name		Chuong D. Ngo	
Total Number of Pages in This Submission		15	Attorney Docket Number		42390P10416

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 50px; width: 100%;"></div>
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	January 6, 2005

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane		
Signature		Date	January 6, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (Wt) 01/04/2004.
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**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

50.00

Complete If Known

Application Number 09/754,040
 Filing Date December 27, 2000
 First Named Inventor Ronen Zohar
 Examiner Name Chuong D. Ngo
 Art Unit 2124
 Attorney Docket No. 42390PT0416

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
29	28	1	50.00
6	6	0	0.00

Multiple Dependent

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	2202	25		Claims in excess of 20
1201	2201	100		Independent claims in excess of 3
1203	2203	180		Multiple Dependent claim, if not paid
1204	2204	150		**Reissue independent claims over original patent
1205	2205	150		**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$)

50.00

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1051	2051	65		Surcharge - late filing fee or oath
1032	2052	25		Surcharge - late provisional filing fee or cover sheet
2053	2053	130		Non-English specification
1251	2251	60		Extension for reply within first month
1252	2252	225		Extension for reply within second month
1253	2253	510		Extension for reply within third month
1254	2254	795		Extension for reply within fourth month
1255	2255	1,080		Extension for reply within fifth month
1401	2401	250		Notice of Appeal
1402	2402	250		Filing a brief in support of an appeal
1403	2403	500		Request for oral hearing
1451	2451	1,510		Petition to institute a public use proceeding
1460	2460	130		Petitions to the Commissioner
1807	1807	60		Processing fee under 37 CFR 1.17(q)
1808	1808	180		Submission of Information Disclosure Sheet
1809	1809	385		Filing a submission after final rejection (37 CFR § 1.129(a))
1810	2810	395		For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Name (Print/Type) William W. Schaal

Registration No. 39,018

Telephone (714) 557-3800

Signature

Date

01/06/05

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☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

50.00

Application Number	09/754,040
Filing Date	December 27, 2000
First Named Inventor	Ronen Zohar
Examiner Name	Chuong D. Ngo
Art Unit	2124
Attorney Docket No.	42390P10416

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
29	28	1	50.00
Independent Claims	6	0	200.00
Multiple Dependent			

Large Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	160	**Reissue independent claims over original patent
1205	500	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$)

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES**Large Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,500	2254	795	Extension for reply within fourth month
1255	2,180	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)
1806	180	1806	180	Submission of Information Disclosure Sheet
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(\$)

Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) William W. Schaal

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Telephone (714) 557-3800

Signature

Date 01/06/05

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Appl. No. 09/754,040
Amdt. Dated 1/6/05
Reply to Office Action of October 6, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. : 09/754,040
Applicant : Ronen Zohar
Filed : 12/27/2000
TC/A.U. : 2124
Examiner : Chuong D. Ngo

Confirmation No. 3337

Docket No. : 42390P10416
Customer No. : 8791

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AMENDMENT

Sir:

In response to the Office action of October 6, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.